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SWINTON  
URBAN DISTRICT COUNCIL

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THE  
HEALTH  
OF  
SWINTON  
1966



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# SWINTON URBAN DISTRICT COUNCIL

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## MEMBERS as at 31st December, 1966

**Chairman of the Council:**  
Councillor Mrs. I. Cobb, J.P.

**Vice-Chairman of the Council:**  
Councillor A. H. Marriott

**Chairman of the Public Health Committee**  
Councillor D. Thompson

### **Councillors:**

Mrs. W. Lawrence	A. Newsam, J.P., (C.C.)
J. R. Beck	J. Randerson
R. Benton	G. Reader
F. Calladine, J.P.	J. W. Taylor
J. Haythorne	E. P. Sykes
W. Gibson	H. R. Trickett

**Medical Officer of Health:**  
D. J. Cusiter, M.B., Ch.B., D.P.H., D.T.M. & H.

**Chief Public Health Inspector:**  
E. Fuller, D.P.A., Cert., R.San., Inst., A.I.H.M.

## P R E F A C E

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Public Health Department,  
Council Offices,  
Swinton.

To the Chairman and Members of  
Swinton Urban District Council.

Madam Chairman, Lady and Gentlemen:

I include in this annual report of the health of your district details of the County Council health and school health services.

The population showed a natural increase of 98 and an overall increase of 40 according to the Registrar General's estimate of the resident population for mid-1966.

There were no maternal deaths in the district. 6 infant deaths were recorded from a total of 276 live births. All were born in hospital but 2 died at home. 3 of the babies were premature. The infant mortality rate (deaths under one year of age per thousand live births) was 21.7 compared with a West Riding rate of 20.1 and a rate for England and Wales of 19.0. The rate for health division No. 26 as a whole was 22.1.

The corrected birth rate was 17.8 per thousand population (West Riding 18.2) based on an increasing population and was lower than last year's rate of 18.5.

The corrected death rate from all causes was 16.2; in excess of that for the West Riding as a whole which was 12.9.

The total deaths were 178 of which 64 were due to diseases of the heart and blood vessels, 28 to cancer in various sites, 30 to respiratory disease and 20 to vascular lesions of the nervous system. These correspond to rates of 4.48 (West Riding 4.48); 2.03 (West Riding 2.00); 2.10 (West Riding 1.72) and 1.40 (West Riding 1.87). With the exception of the rate for respiratory diseases these compare closely with the remainder of the West Riding. There were no deaths from tuberculosis and none from infectious diseases in general.

18 illegitimate births were registered compared with 16 in the previous year and there was one death of an illegitimate child under one year of age.

458 council dwellings have been built since December 1957 and taking into account the clearance of 128 prefabs there is a net increase of 330. 278 unfit dwellings have been demolished in the same period. The population has increased by 20% and the number of dwellings by 14%.

Some problems have been caused by condensation in new flats and reference is made to a leaflet issued jointly by the Ministry of Public Building and Works and the Ministry of Housing and Local Government advising housewives of the following simple rules to keep their homes free of condensation :—

- (1) see that your rooms are always warm and properly ventilated,
- (2) when cooking keep the kitchen door shut and the window open,
- (3) when both washing and drying clothes keep room door shut and window open,
- (4) if paraffin heaters or <sup>or</sup> fly<sup>ess</sup> gas heaters are used be sure the window is open a little,
- (5) in cold weather keep some heating on all the time,
- (6) if the house is unoccupied during the day leave the heating on low. Remember, if a coal fire is used bank it up and keep a guard around.

The care of the elderly is rapidly becoming one of the major problems of the health department. The district councils are providing more and more ground floor accommodation with warden supervision, but surveys carried out by this department for each district in connection with the allocation of tenancies in new schemes show that the need for such accommodation is probably double that already provided.

Modern residential homes, each with accommodation for 35 old people, have been provided in recent years by the County Welfare Committee in Rawmarsh, Wath-upon-Dearne, Thurnscoe and Conisbrough. A similar building in Swinton will be opened in 1967. Nevertheless, there is still a long waiting list for admissions.

344 aged persons in the division benefit from the meals on wheels service and 784 meals are provided weekly at a charge of 1s. 0d. per head to the recipient. 2,744 old people received chiropody treatment during 1966 when 12,665 treatments were carried out either in clinics or at the homes of the patient.

The home help service is provided in the homes of 1,265 pensioners and home helps were employed for a total of 172,337 hours at these homes in the year. In emergencies, for terminal cases of illness, night care is also available.

The biggest problem, however, is the shortage of geriatric hospital beds. Day after day, relatives write or visit this office enlisting the help of the Medical Officer of Health regarding admission of their aged parents to hospital. Many of these relatives have struggled for months to provide the necessary care and attention themselves, others are reluctant to do so or for pressing family reasons are unable to do so. It appears to the public that, because hospital admissions for aged sick persons take so long in this area, the general practitioner in charge of the case is not doing all he can for the patient and they assume that the Medical Officer of Health has overall authority over the situation, which he has not.

A Planning Group for the care of the elderly in hospitals and residential homes, of which I am a member, was formed by the Rotherham and Mexborough Hospital Management Committee in 1966 to discuss these problems. It is estimated that there is a 48% shortage of geriatric beds in the area of the Hospital Management Committee and until this deficiency is rectified the work of the general practitioner will continue to increase and more resources will be needed by the local authority to fill the breach.

The shortage of general practitioners in the area poses yet a further problem. The County Council in an effort to provide better facilities for the family doctor, offers accommodation in child welfare centres for surgery purposes at a modest rental, and in the division family doctors are using Mexborough clinic (three practices), Conisbrough clinic (one practice), Monkwood clinic (one practice) and Kilnhurst clinic (one practice). Thurnscoe clinic is at present being extended to provide accommodation for a group practice of four doctors, and a new clinic being planned for Swinton will be able to accommodate four family doctors. General practitioners also conduct their own antenatal clinics with assistance from the District Midwives at Conisbrough and Mexborough clinics. All Health Visitors in the division are attached to general practitioners, as are the Home Nurses.

The morbidity statistics for the area as supplied by the Ministry of Social Security reveal a high incidence of sickness in the weeks immediately following bank holidays, works' holidays and during the September race week in Doncaster.

Would it be naive to conclude that holidays have a harmful effect on the health of some? This problem is national and not confined to this area. The Executive Council are aware of the problem and of the shortage of family doctors in this area.

I wish to record my thanks to Mr. E. Fuller the Public Health Inspector for his work and co-operation during the year and to the members of the Public Health Committee for their support. My thanks are also due to the staff of the Divisional Health Office for their help in the preparation of this report.

I remain,

Your obedient servant,

D. J. CUSITER,

Medical Officer of Health

Divisional Public Health Office,  
Dunford House,  
Wath-upon-Deane, Rotherham.  
Tel. No. Wath-upon-Deane 2251/2

## SECTION "A"

### Natural and Social Conditions of the area

#### (a) General Statistics

Area (in acres)	...	...	...	...	...	1,718
Registrar-General's estimate of Resident Population Mid-1966	...	...	...	...	...	14,270
Number of inhabited houses at 31st December, 1966						4,778
Population density (persons per house)	...	...				3.0
House density (houses per acre)	...	...	...			2.8
Rateable value	...	...	...	...	...	£419,958
Net product of 1d. rate	...	...	...	...	...	£1,495

#### (b) Physical and Social Conditions

The Registrar-General's estimate of resident population for mid-1966 reveals an overall increase of 40. The natural increase of population i.e. excess of births over deaths for the whole year was 98.

The number of dwelling houses increased by 46 during the year. 70 new houses being completed; 49 by local authority and 21 by private enterprise and 24 demolished.

The main employment in the area is provided by coal mining (61% men), electric domestic equipment, coal by-products, glass containers, stoves and grates and soft drink manufacture. Over 400 women travel daily by organised transport to employment in the West Riding textile industry, food canning at Sheffield, engineering at York and confectionery at Rotherham.

### VITAL STATISTICS

Live Births:—				Males	Females	Total
Total	...	...	...	156	120	276
Legitimate	...	...	...	146	112	258
Illegitimate	...	...	...	10	8	18
Live Birth Rate (uncorrected) per 1,000 population	...					19.3
Live Birth Rate (corrected) per 1,000 population	...					17.8
Illegitimate live births percent- age of total live births	...					6.5

Still-Births:—

				Males	Females	Total
Total	...	...	...	4	3	7
Rate per 1,000 live and still births						24·7

				Males	Females	Total
Total Live and Still births	...			160	123	283

Deaths of Infants under 1 year of age:—

				Males	Females	Total
Total	...	...	...	1	5	6
Legitimate	...	...	...	1	4	5
Illegitimate	...	...	...	—	1	1

Infant Mortality Rate per 1,000 live births ... 21·7

Legitimate Infants per 1,000 legitimate live births ... 19·4

Illegitimate Infants per 1,000 illegitimate live births ... 55·5

Neo-natal mortality rate (deaths under 4 weeks per 1,000 total live births) ... 18·1

Early neo-natal mortality rate (deaths under 1 week per 1,000 total live births) ... 14·5

Perinatal mortality rate (still-births and deaths under 1 week combined per 1,000 total live and still-births) 39·9

Maternal mortality, including abortion

Number of deaths	...	...	...	...	...	Nil
Rate per 1,000 total live and still-births	...	...	...	...	...	—
Total deaths	...	...	...	...	...	178
Death Rate (uncorrected)	...	...	...	...	...	12·5
Death Rate (corrected)	...	...	...	...	...	16·3
Natural increase of population	...	...	...	...	...	9·8

Causes of Death at Different Periods of Life during 1966 in the Urban District of Swinton

CAUSE OF DEATH	Sex	Total all Ages.	Under 4 Weeks.	4 Weeks and under 1 year	AGE IN YEARS								
					1—	5—	15—	25—	35—	45—	55—	65—	75 and over
10. Malignant Neoplasm, Stomach.	M	2	—	—	—	—	—	1	—	—	1	—	—
	F	2	—	—	—	—	—	—	—	—	1	1	—
11. Malignant Neoplasm, Lung Bronchus.	M	4	—	—	—	—	1	1	2	—	—	—	—
	F	2	—	—	—	—	—	—	1	—	—	1	—
12. Malignant Neoplasm, Breast.	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	2	—	—	—	—	—	2	—	—	—	—	—
13. Malignant Neoplasm, Uterus.	F	1	—	—	—	—	1	—	—	—	—	—	—
14. Other Malignant and Lymphatic Neoplasms.	M	11	—	—	—	—	—	—	4	6	—	1	—
	F	4	—	—	—	—	1	1	—	1	—	1	—
15. Leukaemia, Aleukaemia.	M	1	—	—	—	—	1	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
16. Diabetes.	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
17. Vascular lesions of nervous system.	M	3	—	—	—	—	—	—	2	—	—	1	—
	F	9	—	—	—	—	—	—	—	2	—	7	—
18. Coronary Disease, Angina.	M	11	—	—	—	—	—	1	—	3	3	6	—
	F	19	—	—	—	—	—	3	8	3	5	4	—
19. Hypertension with Heart Disease.	M	10	—	—	—	—	—	—	2	4	2	2	—
	F	3	—	—	—	—	—	—	1	—	—	1	—
20. Other Heart Disease.	M	1	—	—	—	—	—	—	—	—	—	—	—
	F	9	—	—	—	—	—	—	3	2	4	4	—
21. Other Circulatory disease.	M	8	—	—	—	—	—	—	—	—	—	—	—
	F	4	—	—	—	—	—	—	1	1	1	2	—
	F	10	—	—	—	—	—	—	1	1	1	8	—

# Causes of Death at different periods of life during 1966 in the Urban District of Swinton

CAUSE OF DEATH	Sex	Total all Ages.	Under 4 Weeks.	4 Weeks and under 1 year	AGE IN YEARS									
					1—	5—	15—	25—	35—	45—	55—	65—	75 and over	
22. Influenza	M	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	1	—	—	—	—	—	—	—	—	—	—	1	—
23. Pneumonia.	M	7	—	—	—	—	—	—	—	—	—	2	3	—
	F	3	—	—	—	—	—	—	—	—	—	—	3	—
24. Bronchitis.	M	16	—	—	—	—	—	—	—	1	2	9	4	—
	F	3	—	—	—	—	—	—	—	—	—	2	1	—
26. Ulcer of Stomach and Duodenum.	M	2	—	—	—	—	—	—	—	—	—	—	2	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—
28. Nephritis and Nephrosis	M	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	1	—	—	—	—	1	—	—	—	—	—	—	—
31. Congenital malformation.	M	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	2	2	—	—	—	—	—	—	—	—	—	—	—
32. Other defined and ill-defined diseases.	M	7	1	—	—	—	—	—	—	—	—	2	1	—
	F	7	2	—	—	—	—	—	—	—	—	2	3	—
33. Motor vehicle accidents	M	3	—	—	—	1	—	—	—	1	—	—	—	—
	F	2	—	—	—	—	—	—	—	—	—	—	1	—
34. All other accidents	M	3	—	—	—	—	—	—	—	—	1	—	—	—
	F	3	—	1	—	—	—	—	—	—	—	—	—	2
35. Suicide.	M	1	—	—	—	—	—	—	—	—	—	1	—	—
	F	1	—	—	—	—	—	—	—	—	—	—	—	—
Total all causes.	M	101	1	—	—	2	1	2	7	27	28	33	36	—
	F	77	4	1	—	1	—	2	4	11	17	—	—	—

## Deaths of Infants under 1 Year of Age, 1966

No.	Date of death	Cause of death	Age	Birth weight	Died	Dom. or Inst. birth
1.	13.1.66	1a Gross prematurity (24 weeks gestation)	30 mins.	1.0	City General Hospital, Sheffield.	Inst.
2.	26.1.66	Asphyxia due to lying prone on her pillow in her cot and enlarged thymas gland. Misadventure.	4 mths.	6.12	At home.	Inst.
3.	6.3.66	1a Prematurity 11 Uncontrollable pre-eclamptic toxæmia of mother.	16 hours	3.0	Montagu Hospital, Mexborough.	Inst.
4.	17.4.66	1a Acute heart failure both left and right ventricular. b Cardiomyopathy..	3 wks.	8.7	At home	Inst.
5.	13.8.66	1a Asphyxia b Atelectasis lungs.	4 hours	6.4	Montagu Hospital, Mexborough.	Inst.
6.	28.7.66	1a Anencephalus	40 mins.	2.5	Montagu Hospital, Mexborough.	Inst.

	Swin- ton Urban District 1966	Div. 26 1966	Aggregate West Riding Urban Districts	West Riding Admini- strative County	England and Wales
Population .....	14,270	110,290	1,238,310	1,748,970	*
Live Births (Crude) .....	19.3	18.5	17.8	18.0	*
Live Births (Corrected) .....	17.8	18.0	18.2	18.2	17.7
Death Rate—All causes Crude .....	12.5	11.4	12.9	12.1	*
Death Rate—All causes Corrected .....	16.2	14.5	13.3	12.9	11.7
Infective and Parasitic Diseases - excluding Tuberculosis, but in- cluding Syphilis and other V.D. ....	—	0.01	0.03	0.03	*
Tuberculosis: Respiratory .....	—	0.05	0.05	0.05	0.04
Other Forms .....	—	—	—	—	0.01
All Forms .....	—	0.05	0.05	0.05	0.05
Cancer .....	2.03	1.76	2.16	2.00	2.25
Vascular Lesions of the Nervous System .....	1.40	1.32	2.02	1.87	*
Heart and Circulatory Diseases .....	4.48	4.22	4.77	4.48	*
Respiratory Diseases .....	2.10	1.99	1.88	1.72	*
Maternal Mortality .....	—	—	0.31	0.25	0.26
Infant Mortality .....	21.7	22.1	20.1	19.8	19.0
Neo Natal Mortality .....	18.1	15.2	13.2	12.6	12.9
Perinatal Mortality .....	38.9	27.5	25.9	25.1	26.3
Still-Births .....	24.7	16.4	14.9	14.4	15.4

\*Figures not available.

## DIVISIONAL VITAL STATISTICS

In the discussion that follows it should be remembered that the rates are calculated on relatively small numbers and that variations from year to year may or may not be statistically valid. No conclusions can, therefore, be drawn from minor annual fluctuations but observation of the overall trend of the differing rates over a period of years is of value.

### Live Births :

In this division in 1966 113 illegitimate births have been recorded from a total of 2,038 live births. 5.5% of all live births in the division were, therefore, illegitimate. In the previous year the percentage was 4.9% when 102 illegitimate births were registered from a total of 2,070 live births. This rising trend in illegitimate births applies to the whole country but is more pronounced in the larger cities and towns.

For some years now the number of births and the birth rate have progressively increased. The birth rate for the division in 1966 was 18.5 per thousand live births which is exactly the same rate as for 1965. The rate for the administrative county was 18.0, and for England and Wales 17.7. The divisional birth rate is, therefore, slightly higher than that for the county and for the country as a whole.

The <sup>Natural</sup>~~natural~~ increase of population i.e. excess of births over deaths was 813. Nevertheless the Registrar General's estimate of population for mid 1966 for the division as a whole showed a decrease of 110. These figures would indicate that approximately 900 people have migrated from the area during the year, and as there has been an increase in the population of adjoining rural districts it would appear that many families are moving to modern houses recently constructed in the more amenable country districts where they also have the benefit of lower rates.

### Deaths :

The death rate for the division from all causes was 11.5 per 1,000 of the population compared with a West Riding rate of 12.1 and 11.7 for England and Wales. Whilst this rate approximates closely to that for the rest of the country and the remainder of the West Riding, the rates for individual causes of death reveal an interesting feature in this division. Whereas the most common causes of death for England and Wales in descending order are as follows, heart and circulatory diseases, cancer, vascular lesions of the nervous system and

respiratory diseases, in this division respiratory diseases now occupy second position instead of fourth. Whilst perhaps this could be attributed to environmental conditions at work, i.e. in the coal mining industry, there is no doubt that atmospheric pollution is an underlying cause.

### **Infant Mortality :**

The infant mortality rate represents the number of children who die under the age of one year calculated per thousand live births. The rate for this division was 22·1 in 1966 which is less satisfactory than last year when the rate was 18·1. The rate for the West Riding County fell in 1966 to 19·8 compared with 20·7 in 1965. The rate for England and Wales in 1966 was 19·0.

This rate is an index of the apparent gain in health of any community and has shown a decline of 130 per thousand since the end of the nineteenth century. The causes of death of the infants who die in this division are representative of the general pattern of infant deaths in England and Wales i.e. respiratory diseases being the most common cause followed by congenital malformations, gastro-enteritis and infectious diseases.

### **Peri-natal Mortality :**

The peri-natal mortality rate includes stillbirths and deaths under one week per thousand live and stillbirths. It provides a more satisfactory guide to the standard of maternal care than the infant mortality rate by itself, as deaths of infants under one week and stillbirths represent the hard-core of infant mortality, and the problem now is to determine the cause of death and decide the best measures to be taken during the ante-natal period to avoid these deaths.

The peri-natal mortality rate in 1966 was 27·5 compared with a rate for the West Riding of 25·1.

Whilst the local rate is slightly higher than for 1965 the general all round improvement has been maintained. The stillbirth rate per thousand live and stillbirths was 16·4 compared with 17·6 in 1965 and 19·6 in 1964. However, the rate still remains slightly higher than that for the West Riding as a whole which was 14·4 in 1966. The commonest causes of death are prematurity, post-natal asphyxia, congenital malformations and birth injuries. Prematurity remains the dominant factor.

### **Tuberculosis :**

The death rate for tuberculosis remains at a satisfactory low level. With a total of 6 deaths in 1966 the rate was 0.05 and the West Riding rate was the same. With the recent influx of susceptible populations to this country efforts at eradication of this disease must continue and such measures as contact tracing, B.C.G. vaccination, the use of diagnostic radiological services and continuing improvements in nutrition must be diligently applied.

### **Infective and Parasitic Diseases :**

The rate for this disease including all infectious conditions except tuberculosis but including venereal disease was 0.1 per thousand and only one death was recorded in the division in 1966. The position is, therefore, a satisfactory one.

### **Cancer :**

In 1966 the death rate for cancer of all sites was 1.76 per thousand of the estimated population (West Riding rate 2.0). A total of 189 deaths was attributed to cancer, 10 fewer than in 1965. Deaths from cancer of the lung total 44 compared with 55 in the previous year. 23.3% of all cancer deaths were due to cancer of the lung and 34 of the 44 deaths were in males.

Cancer of the lung is now the most common type of malignant disease in the country and presents a major health hazard. In England and Wales as a whole one third of the total cancer deaths are from these causes, and the overwhelming majority of physicians have no doubt that this increase is due to cigarette smoking.

### **Vascular Diseases of the Nervous System :**

The death rate from these causes was 1.32 per thousand of the population (West Riding rate 1.87). This was slightly lower than for 1965, although the upward trend in the West Riding as a whole continues. Under this heading deaths are included from such factors as strokes due to cerebral haemorrhage, thrombosis or embolism, and mortality increases progressively with age.

### **Heart and Circulatory Diseases :**

This group represents the most common cause of death in the country. The rate for this division was 4.22 per thousand compared with a rate of 4.48 for the West Riding as a whole. The rate for this area shows only a slight fluctuation from that recorded for 1965.

Included in this group are deaths from coronary disease and angina, and the mortality is appreciably high at the age of 55 years and upwards.

### **Diseases of the Respiratory System :**

As previously reported deaths from respiratory diseases are disproportionately high in this division (17.7% of all deaths) in comparison with other causes of death. The death rate of 1.79 per thousand was higher than for last year in the division (1.42). Of the 223 deaths recorded under this heading more than half i.e. 124, were attributed to chronic bronchitis. This disease is important not only as a cause of death but also as a cause of frequent and repeated illness and absence from work. Atmospheric pollution and cigarette smoking are heavily incriminated in its production and play a far more important role than working conditions, although in a coal mining area this latter factor should not be left out of the count.

### **Maternal Mortality :**

I am pleased to report that there were no maternal deaths recorded in the division in 1966.

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## SECTION 'B'

### General Provision of Health Services in the Area Staff at 31st December, 1966

#### Divisional Medical Officer and Medical Officer of Health :

Dr. D. J. Cusiter

#### Divisional Nursing Officer :

Miss V. Dunford

#### Senior Assistant County Medical Officers :

Drs. D. M. Bell, S. K Pande, Margaret Bolsover.

#### Part-time Medical Officers :

Drs. Barbara Demaine,	Jessica Core,
M. F. W. Bajorek,	W. R. Porter,
P. L. Baker,	Mary Scott,
B. R. Baker,	H. H. Smith,
I. Campbell,	J. Wilczynski.

#### Obstetrician :

Dr. J. C. MacWilliam

#### Paediatrician :

Dr. C. C. Harvey

#### Ophthalmologists :

Miss M. A. C. Jones, Dr. S. K. Bannerjee.

#### Child Psychiatrist :

Dr. J. D. Orme

#### Child Guidance :

Mr. C. Pritchard, Mrs. R. I. Pilkington.

#### Health Visitors and Assistant Health Visitors :

Mrs. E. Appleyard,	Mrs. M. Mitchell,
Mrs. J. Brown,	Mrs. N. M. Noble,
Mrs. N. M. Dunford,	Miss M. O'Connor,
Mrs. G. I. Ellis,	Mrs. I. Pettman,
Miss L. Ferneyhough,	Mrs. E. Pocklington,
Mrs. M. Fisher,	Mrs. O. Smith,
Mrs. D. Goddard,	Miss M. Sorby,
Miss M. L. Hampshire,	Miss A. D. Willoughby,
Mrs. M. Jenkinson,	Miss H. Wray,
Mrs. M. M. Knowles,	Mrs. I. E. Milnes,
Mrs. G. Malpass,	Mrs. J. Hanmer,
Mrs. J. V. McLoughlin,	Mrs. I. Senior.

### **Midwives :**

Mrs. D. P. J. Butler,	Miss G. Randall,
Mrs. G. M. Corley,	Mrs. N. Roe,
Miss J. Dearden,	Mrs. A. E. Smith,
Mrs. O. D. Edwards,	Mrs. M. Smith,
Mrs. M. L. Green,	Mrs. D. A. Taylor,
Mrs. E. Gross,	Mrs. V. Tunney,
Mrs. A. Hessam,	Mrs. M. Venables,
Mrs. H. E. Hillery,	Mrs. R. Williams,
Miss K. A. A. Howland,	Miss D. A. M. Spencer,
Mrs. B. Hill,	Mrs. J. Godfrey.
Mrs. V. J. Marley,	

### **District Nurses :**

Mrs. M. Brooks,	Mrs. M. Herring,
Mrs. J. Cox,	Mrs. B. W. Hucknall,
Mrs. H. Dyson,	Mrs. A. Leavers,
Mrs. E. Elsworth,	Mrs. M. McCormack,
Mrs. R. Fairman,	Mrs. A. E. Moore,
Mrs. E. Firth,	Mrs. M. Probert,
Miss E. Gill,	Mrs. K. Roebuck,
Mrs. I. Goldsbrough,	Mrs. M. Waldron,
Mrs. N. Harrison,	Mrs. J. Wilson.

### **Mental Welfare Officers :**

Mrs. F. H. Redman,	Miss D. Bailey.
Mr. R. N. Halliday,	

### **Training Centre :**

Supervisor : Mrs. P. M. Winstanley

Mrs. J. Cavill,	Mrs. M. Gray,
Mr. D. Beevers,	Miss P. Peart,
Mr. T. Garbett,	Mrs. S. E. Norburn,
Mrs. E. Naylor,	Mrs. M. Rowbotham.
Mrs. I. Ardron,	

### **Administrative and Clerical Staff :- Senior Clerks :**

Mr. P. Goddard,	Mr. A. Wilkinson.
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### **Sectional Clerks**

Mr. E. K. New	Mr. H. Haigh.
Mrs. D. Billington.	

### **Clerks :**

Mrs. J. Gwynnette,	Mrs. H. Shirley,
Mrs. K. S. Hickling,	Mrs. P. A. Sturman,
Mrs. H. Mangham,	Miss S. A. Winder,
Mrs. A. Mann,	Miss S. Bennett,
Mrs. F. Shaw,	Miss J. Worton.

### **Home Helps :**

174 home helps

# LOCAL HEALTH AUTHORITY SERVICES

## Care of Mothers and Young Children - Section 22

### Ante-Natal Clinics :

C.W.C. Welfare Avenue, Conisbrough.	Tuesday 2 - 4 p.m.	Dr. J. C. MacWilliam
C.W.C. Church Road, Denaby Main.	Wednesday 10 a.m. - 12 noon	do.
C.W.C. Welfare Park, Goldthorpe.	Thursday 2 - 4 p.m.	do.
C.W.C. Adwick Road, Mexborough.	Wednesday 2 - 4 p.m.	do.
C.W.C. Barbers Avenue, Rawmarsh.	Thursday 10 a.m. - 12 noon	Dr. Mary Scott
C.W.C. Rock House, Swinton.	Thursday 10 a.m. - 12 noon and 2 - 4 p.m.	Dr. H. H. Smith
C.W.C. off Houghton Road, Thurnscoe.	Friday 10 a.m. - 12 noon	Dr. J. C. MacWilliam
C.W.C. Church Street, Wath-upon-Dearne.	Friday 2 - 4 p.m.	Dr. Margaret Bolsover

### Attendances :

Clinic	No. of patients who attended	No. of Attendances
Conisbrough ...	48	254
Conisbrough G.P. Clinic...	147	801
Denaby Main ..	104	617
Goldthorpe ...	123	395
Mexborough ...	57	335
Mexborough G.P. Clinic...	93	511
Rawmarsh Barbers Ave.	144	687
Rawmarsh Monkwood ..	13	100
Swinton ...	166	890
Thurnscoe ...	26	205
Wath-upon- Dearne ...	75	437
<b>TOTAL</b>	<b>996</b>	<b>5,232</b>

I am grateful for the co-operation and support received from Dr. J. C. MacWilliam who is Medical Officer in charge of the ante-natal clinics in the Conisbrough, Mexborough and Dearne areas and also holds an appointment as Senior Hospital Medical Officer at the Montagu Hospital, Mexborough.

There were 2,038 live and stillbirths in the divisional area in 1966 and 69% of all expectant mothers in the area attended the local authority ante-natal clinics at some time during their pregnancy.

### Ante-Natal Relaxation Classes :

Relaxation classes are held at 7 centres which are listed below.

Clinic					No. of attendances
Goldthorpe	...	...	...	...	213
Mexborough	...	...	...	...	29
Rawmarsh	...	...	...	...	549
Swinton	...	...	...	...	256
Thurnscoe	...	...	...	...	217
Wath-upon-Dearne	...	...	...	...	363
Conisbrough	...	...	...	...	346
TOTAL					1,973

### Family Planning Clinics :

The Mexborough branch of the Family Planning Association have the use of the Child Welfare Centre at Mexborough for their clinics. In addition to a grant from the West Riding County Council during 1966 the branch also received a donation of £20 from the Wath-upon-Dearne Urban District Council to help with problem family mothers in that area. Close co-operation between our health visitors and the family planning staff was maintained particularly with regard to this group of patients. Sessions are held each Tuesday evening from 6.15 p.m. to 7.30 p.m. with the exception of the month of August.

Forty-five sessions were held at which a total of 454 women attended. 178 of these were new patients.

Facilities were also available at the clinic for cervical smears to be taken as from April 1966 and 145 were taken during the nine months.

### Infant Welfare Clinics :

C.W.C. Conisbrough Monday 2 - 4 p.m.	Dr. M. Bajorek
C.W.C. Denaby Main Tuesday 2 - 4 p.m.	Dr. M. Bajorek
C.W.C. Goldthorpe Monday 2 - 4 p.m.	Dr. B. R. A. Demaine
C.W.C. Mexborough Tuesday 2 - 4 p.m. Thursday 2 - 4 p.m.	Dr. B. R. A. Demaine Dr. W. R. Porter
C.W.C. Rawmarsh (Monkwood) Thursday 2 - 4 p.m.	Dr. D. M. Bell
C.W.C. Rawmarsh (Barbers Avenue) Tuesday 2 - 4 p.m.	Dr. Jessica Core
C.W.C. Swinton Monday 2 - 4 p.m.	Dr. I. Campbell
C.W.C. Thurnscoe Monday 2 - 4 p.m. Tuesday 2 - 4 p.m.	Dr. J. Wilczynski Dr. G. C. McGlone
C.W.C. Wath-upon-Deerne Monday 2 - 4 p.m. Tuesday 2 - 4 p.m.	Dr. D. M. Bell (for both sessions)
C.W.C. Kilnhurst Wednesday 2 - 4 p.m.	Dr. Jessica Core

### Attendances :

Centre	No. of individual children who attended	Total No. of Attendances	
		Under 1 year	Over 1 year
Conisbrough .....	368	2683	486
Denaby Main .....	328	838	1109
Goldthorpe .....	420	1615	1213
Kilnhurst .....	219	648	1164
Mexborough .....	642	4756	1343
Monkwood .....	320	564	725
Rawmarsh .....	538	1288	1020
Swinton .....	764	2042	2765
Thurnscoe .....	749	2213	3145
Wath-on-Deerne .....	888	1944	2935
	5236	18591	15905

Attendances for 1966 showed an increase of 8% over the figures for 1965.

The increase is mainly in infants over one year of age. The number of individual children attending the clinics also showed a 19% increase over the previous year.

Infant Welfare clinics provide facilities for the examination of children of varying ages and for immunisation and vaccination. The opportunity is also taken by the health visitor to introduce health education activities during these sessions. A recommended range of proprietary foods and National Welfare foods are on sale at all clinics.

### **Premature Infants :**

A premature infant is one which weighs  $5\frac{1}{2}$  lbs or less at birth. This standard is a convenient one since the medical care of small babies whether they be premature or immature is along the same lines. It must be noted, however, that not all babies of this weight bear the same hazard. Observations on the risks of prematurity are included elsewhere in the preface to this report.

As in 1965 there were 149 premature births including eight sets of twins; 16 were stillborn. 18% of the premature babies were born at home and 82% in hospital. Of those born at home 4 weighed under 4 lbs, 22 premature babies died in the first four weeks of life; all in hospital.

# PREMATURE INFANTS BORN IN 1966

District	Born Alive			Stillbirths			No. removed to Hosp. After Birth	No. who survived 28 days		
	At Home	In Hosp.	Total	At Home	In Hosp.	Total		Born at Home	Born in Hosp.	Total
Conisbrough .....	4	18	22	—	2	2	1	3	13	16
Dearne .....	9	28	37	—	3	3	3	8	25	33
Mexborough .....	1	11	12	1	1	2	—	1	10	11
Rawmarsh .....	5	29	34	1	2	3	1	4	24	28
Swinton .....	1	11	12	—	2	2	—	1	6	7
Wath-upon-Dearne .....	5	11	16	—	4	4	—	4	12	16
TOTALS	25	108	133	2	14	16	5	21	90	111

## Care of the Unmarried Mother and Child :

130 illegitimate births were registered during 1966, representing 5.5% of all births.

### Marital Status :

#### (1) Married :

(a) with previous illegitimate children ...	11
(b) without previous illegitimate children ...	14

#### (2) Single :

(a) with previous illegitimate children ...	10
(b) without previous illegitimate children ...	55

#### (3) Widowed or Divorced :

(a) with previous illegitimate children ...	1
(b) without previous illegitimate children ...	2

### Age incidence :

(1) Under 15	2
(2) Age 15 - 19	35
(3) Age 20 - 24	26
(4) Age 25 - 29	15
(5) Age 30 - 39	13
(6) Age 40 and over	2

The County Council scheme for the care of the unmarried mother and her child provides for financial responsibility to be accepted by the County Council for the maintenance of these unmarried mothers in welfare homes for a period of thirteen weeks, excluding the lying-in period. I am grateful to the social workers of the Doncaster and Sheffield Diocesan Moral Welfare Council for their co-operation and help during the year.

### Problem Families :

Three meetings of the co-ordinating committee were held during 1966. The committee meets under the chairmanship of the Divisional Medical Officer and consists of representatives from the Education Department, Welfare and Childrens Departments, Urban District Councils, Ministry of Social Security, National Coal Board, Probation Service, N.S.P.C.C. and Health Department.

The number of cases which can be adequately discussed at each meeting is limited and emphasis is therefore placed on those in which the County Council is making a rent guarantee

to the Urban District Council. The latter scheme provides breathing space in which the committee are able to make an assessment as to whether the parents are ready to accept and make use of the opportunities offered by various departments to establish themselves, or whether they are completely indifferent to the needs of their families. Whilst, however, the majority of cases assisted in this way have managed to pay their rent subsequently and show some improvement in their standards, other families have finally been evicted when the rent guarantee was withdrawn. By arrangement with the Treasurers of the Urban District Councils reports of rent arrears are submitted frequently to the Divisional Medical Officer relating to tenants who currently have their rent guaranteed by the County Council

### MIDWIFERY — SECTION 23

Twenty-one midwives were employed in the divisional area at the 31st December 1966. Although the authorised divisional establishment is 24 no action was taken to replace staff who retired or resigned as this was not justified.

The number of home confinements continued to decrease and only 34% of the 2,072 live and stillbirths in the division during 1966 were delivered at home. It is pleasing to note that the ratio of institutional births in this area is now nearing the 70% recommended by the Cranbrook Committee in its report on the maternity services.

General practitioners were present at 106 of the 697 confinements which took place at home and medical aid was requested on 60 occasions. Midwives attended 147 mothers who were delivered in institutions but discharged after forty-eight hours, a further 172 who were discharged up to and including the fifth day and 252 who were discharged between the fifth and tenth day. The average number of confinements attended by each midwife during 1966 was 33. All midwives are authorised to use their private motorcars on official business and in common with other local authorities the County Council operate an assisted car purchase scheme for staff qualified as 'essential users'.

I would like to record my thanks to Miss Vernon, Mrs. Stott and Mrs. Tunney who retired during the year after many years of faithful service in the area.

Refresher courses were arranged for those members of the staff who were required to attend in accordance with Section

'G' of the rules of the Central Midwives Board, and five midwives attended such courses in 1966. The County Council also provide courses of instruction for midwives at their Adult College at Grantley Hall, and two midwives from this division attended during the year.

In 1966 a portable incubator built to specification laid down by the County Council was put into use in the divisional area. This can be heated from the battery of the ambulance and is used for the transport of small babies from home to hospital or between one hospital and another. All midwives were instructed in its use and each midwife is called upon in turn to arrange for its maintenance and ensure its readiness in case of need. Two sorrento cots are also kept at the ambulance depot to facilitate the nursing of small babies at home or for other emergency use.

#### Visits :

		Ante-Natal	Post-Natal
Domiciliary cases ...	...	5,434	10,073
Hospital cases ...	...	1,481	2,757
		<hr/>	<hr/>
		6,915	12,830
		<hr/>	<hr/>

### HEALTH VISITING — SECTION 24

The health visitor's duties have undergone great change during recent years. Possibly only about one third of her time is now devoted to the routine visiting of infants, and she is more concerned with care and after-care, prevention of illness and health education for the family as a whole.

All health visitors in the division are attached to general practitioners but the extent of this liaison varies from practice to practice. In some areas this consists of only weekly visits by the health visitor to the surgery and occasional telephone contact, whilst at the other end of the scale many doctors rely heavily on the health visitor to seek solutions to the many social problems of their patients. With the shortage of geriatric beds in the area and the continued lack of places in residential accommodation it follows that the main problems are with the care of the aged patient.

Three health visitors attend five hospitals in the area on liaison duties and two other health visitors attend in similar capacity at the chest clinic. Further details of these duties are included later in this report under the heading of Care and After-care.

The health visitors in this division have a dual role of school nurse and, therefore, assist at school medical inspections, vaccination and immunisation sessions in school, carry out cleanliness surveys and routine audiometry testing and many other duties which fall to the lot of the school nurse.

All immigrants entering the area and notified to this department by Sea and Airport Authorities are visited by the health visitor who gives advice regarding the medical and other essential services available to them. In this connection use is made of a card printed in English, Hindi, Urdu and Arabic.

All home accidents reported to the department by the various hospitals are investigated by the health visitor to ascertain the cause of the accident and advise on suitable measures to prevent recurrence.

In September 1966 a new training school for health visitors was opened in Sheffield. Two of our staff are designated as fieldwork instructors and they supervise the field training of students attending both the Sheffield and Leeds health visitor training centres. The department also helps with the training of student hospital nurses from the Rotherham training school. Five health visitors from this division attended Refresher Courses at the County Council Adult College at Grantley Hall during 1966, and eight attended a course of instruction in the Ascertainment of Deafness in Young Children conducted by Professor and Lady Ewing of Manchester University. All of the qualified health visitors in this division have now attended such a course. Other lectures have been arranged for the staff and regular divisional meetings are held to discuss current topics and common problems.

There are 24 nurses employed in the health visiting service at the 31st December 1966; 18 of whom were fully qualified.

The following is an analysis of the work undertaken by health visitors during 1966.

### Visits :

Expectant mothers	...	...	...	132
Children under 1 year	...	...	6,062	
Children aged 1 - 2 years	...	...	4,793	
Children aged 2 - 5 years	...	...	9,024	
			<hr/>	19,879
Tuberculosis households	...	...		484
Other cases	...	...	...	9,997
School health cases	...	...	...	1,022
Ineffective	...	...	...	4,015
			<hr/>	
			Total	<hr/> 35,529 <hr/>

### Clinic and School Sessions :

Maternity and Child Welfare	...	...	...	2,036
Ultra Violet Light...	...	...	...	—
Specialist - Chest	...	...	...	9
Specialist - Other	...	...	...	238
School Health	...	...	...	1,022
			<hr/>	
			Total	<hr/> 3,305 <hr/>

## HOME NURSING — SECTION 25

The staff of the home nursing service at 31st December 1966 consisted of 18 full time and one part-time nurse. The staff who are able to drive cars are either authorised to use their own vehicles on official business or have been provided with County owned vehicles.

A day and night sitting service has been established to provide relief for relatives nursing terminal illnesses. The service in this division has mainly been confined to night work and the majority of cases nursed were terminal cases of cancer. In 1966 five cases were helped and 208 hours of assistance was given at a cost of £62 10s. 0d.

The following are statistics relating to the work of the home nurse in 1966. It will be noted that they made 53,843 visits to 1,112 patients. Whilst the number of patients nursed fell by 150 compared with 1965, the number of visits showed an increase of 4,800. Over half of the patients were aged 65 or over and they were visited on 34,549 occasions. 572 patients had more than 24 visits each during the year.

### Case Summary :

Classification	No. of cases attended	No. of visits made
Medical .....	1,345	42,968
Surgical .....	334	8,518
Infectious Diseases .....	11	101
Tuberculosis .....	18	1,233
Maternal complications .....	58	510
Other .....	46	513
<b>TOTALS:</b> .....	<b>1,812</b>	<b>53,843</b>
Patients included above who were aged 65 or over .....	1015	34,549
Children included above who were under 5 or less .....	46	468
Patients included above who have had 24 visits or more .....	572	37,412

Of the total of 1,812 patients nursed during the year 1,245 cases were completed by the 31st December 1966. The main categories of diseases for which these patients were treated included respiratory diseases 212 (i.e. bronchitis, pneumonia but not tuberculosis), anaemias 88, complications of pregnancy 50, skin diseases 71 (i.e. boils, carbuncles, etc.), constipation 67, diseases of the heart and arteries 107. The treatment consisted of injections in 484 cases and general nursing in 434 cases. Antibiotics were administered by injection in 259 cases and drugs for anaemias accounted for 119 cases in which injections were given. 7,435 visits were made by home nurses for the sole purpose of giving injections.

## VACCINATION AND IMMUNISATION — SECTION 26

### Smallpox Vaccination

Age at 31/12/66	Under 1 1966	1—4 1962/65	5—14 1952/61	15 or over before 1952	Total
No. Vaccinated					
Dearne .....	1	83	30	24	138
Conisbrough .....	—	57	1	2	60
Mexborough .....	2	55	11	41	109
Wath .....	—	63	33	78	174
Swinton .....	1	94	19	27	141
Rawmarsh .....	2	73	22	7	104
Total .....	6	425	116	179	726
No. Re-vaccinated					
Dearne .....	—	—	12	33	45
Conisbrough .....	—	—	—	—	—
Mexborough .....	—	—	4	24	28
Wath .....	—	—	1	15	16
Swinton .....	—	2	3	12	17
Rawmarsh .....	—	1	4	4	9
Total .....	—	3	24	88	115

The number of persons vaccinated in 1966 shows an increase of over 100% on the total for 1965. It is pleasing to note 425 infants between the ages of one and four years were vaccinated against a total of 260 for the previous year.

### Diphtheria Immunisation

Urban District	No. of children primarily Immunised			No. of children given booster doses during 1966
	Under 5 yrs.	5—14 years	Total	
Conisbrough	248	—	248	143
Dearne .....	332	—	332	4
Mexborough	243	1	244	103
Wath .....	287	8	295	70
Swinton .....	270	13	283	152
Rawmarsh .....	262	6	268	66
Total .....	1642	28	1670	538

The immunisation rate in this division is at a satisfactory level and no cases of diphtheria have been reported for some years.

Poliomyelitis Vaccination

	No. of persons completely Vaccinated during 1966		Total persons completely Vaccinated	
	3 Dose	4 Dose	3 Dose	4 Dose
Children born in years 1951 — 1966 .....	5677	946	31610	8774
Young Persons .....	551	61	15669	2422
TOTAL .....	6228	1007	47279	11196

Vaccination against poliomyelitis in this division is carried out solely by means of oral vaccine and no supplies of salk vaccine for use by injection were obtained during 1966.

Last year I reported on the efforts made in the division to achieve a higher rate of immunisation amongst school children. The 98% acceptance rate has been maintained amongst school children and concerted efforts by the health visiting staff have resulted in an increased rate of vaccination amongst pre-school children. Of the estimated child population in the division of 33,000, 31,610 have been completely vaccinated representing a rate of 96%.

AMBULANCE SERVICE — SECTION 27

The local ambulance station is situate at Dunford House, Wath-on-Dearne adjacent to the Divisional Health Office. The Station Officer Mr. H. Godly has kindly supplied me with the statistics listed below. The staff of 31 includes 23 male driver-attendants, one female driver-attendant, 5 male shift leaders and 2 clerk/telephonists :—

No. of patients conveyed ... ..	42,659
No. of journeys ... ..	7,026
Total mileage 1.1.66 to 31.12.66 ... ..	214,337
Details of journeys :	
No. of patients to out-patient clinics ... ..	33,721
No. of patients for admission to hospital ... .. (2,126 emergencies)	3,798
No. of patients for discharge from hospital ... ..	2,946
No. of patients transferred from hospital to hospital ... ..	1,056
No. of patients from accidents ... ..	838
Total	42,359

There are 8 vehicles stationed at Wath-on-Dearne all equipped with short wave radio communication sets.

One third of the staff have received two weeks training at the new Ambulance Training School, Elm Bank, Cleckheaton. The syllabus of this training course includes all aspects of ambulance aid, anatomy and physiology treatment, artificial respiration and driving skills.

The ambulance depot telephone number is Wath 2234/5 night and day, and any person can order an ambulance for an accident or emergency childbirth where it is apparent that emergency hospital treatment is required. The Women's Voluntary Service are also called upon during emergencies to convey sitting patients.

Out-patients form the great majority of ambulance patients, and the number of patients conveyed during 1966 showed an increase of 4,000 on the previous year. The number of journeys undertaken was 300 more than in 1965 and the mileage increased by 8,000 miles.

## **PREVENTION OF ILLNESS—CARE AND AFTER CARE**

### **SECTION 28**

#### **Nursing Equipment in the Home**

1,300 issues of various forms of nursing equipment were made in 1966. A full range of smaller items is readily available from the home nurse or from stocks held at child welfare centres. Larger items of equipment which are not immediately available can be obtained at reasonably short notice.

More and more use is made of disposable items of equipment.

#### **Hospital After-care**

The following hospitals are attended by health visitors each week:—

Montagu Hospital, Mexborough

Fullerton Hospital, Denaby Main

Wathwood Hospital, Wath-upon-Dearne

Doncastergate Hospital, Rotherham

Moorgate Hospital, Rotherham

## Tuberculosis After-care

A close liaison is maintained between this department and Dr. J. D Stevens, Consultant Chest Physician at Mexborough Chest Clinic. Miss L. Ferneyhough a health visitor from Thurnscoe visits the Chest Clinic at regular intervals for the purpose of exchanging information regarding notified cases and the follow-up of contacts. A register is maintained in the Divisional Office as a result of this liaison, to which interested members of the staff have access. A second health visitor Mrs. G. I. Ellis attends the weekly session held at the Chest Clinic for children. Patients from the Rawmarsh Urban District are seen at Rotherham Chest Clinic (Consultant Chest Physician Dr. A. C. Morrison) and a health visitor from a neighbouring division acts as a link with this clinic.

202 new contacts were examined at Mexborough Chest Clinic in 1966 as a result of the follow-up of 22 newly notified cases of tuberculosis. 28 were men, 56 women and 118 children.

Following the discovery of a case of primary tuberculosis in a school boy as a result of heaf testing for B.C.G. vaccination, 31 immediate contacts and 24 school staff were followed up. 23 of the pupils were heaf negative and were given B.C.G. vaccination followed by chest x-ray at the Mass Radiography Unit where all the teaching staff attended too; all proved to be clear. Eight pupils who were heaf positive were referred to the Chest Clinic for further investigation but nothing abnormal was detected, although some are still under observation.

No employment difficulties have been encountered in respect of known cases of tuberculosis.

2,193 children were offered heaf testing during 1966 and an acceptance rate of 88% was achieved; an increase of 8% over 1965 and 18% over 1964. The incidence of negative reactors in the schools was within the national average. The number of positive reactors referred for chest x-ray i.e. grade 3 or 4, was also within normal limits.

The South Yorkshire area Mass Radiography Unit held public sessions at the Baths Hall Denaby Main, Miners Welfare Hall, Conisbrough, Child Welfare Centre, Mexborough, C.W.S. Factory, Bolton-on-Deane, N. Corah Ltd., Bolton-on-Deane and at the Welfare Hall, Goldthorpe during 1966. There were 6,064 x-rays carried out and a total of 254 abnormalities were discovered.

The following is a summary of the abnormalities discovered :—

Abnormalities of the Bony Thorax and Soft Tissues—Congenital .....	14
Bacterial and virus infections of the lungs.....	9
Bronchiectasis .....	8
Emphysema .....	8
Pulmonary fibrosis—non-tuberculosis.....	27
Pneumoconiosis—not previously certified.....	65
Pneumoconiosis—previously certified.....	10
Benign tumours of the lungs and mediastenum	1
Carcinoma of the lung and mediastenum.....	3
Sarcoidosis and collagenous disease.....	2
Pleural thickening of calcification— non-tuberculosis .....	21
Abnormalities of the diaphragm and oesophagus; congenital and acquired.....	2
Congenital abnormalities of heart and vessels...	3
Acquired abnormalities of heart and vessels.....	32
	—
	205
	—

The Rotherham and Doncaster Care Committees have provided personal clothing for families where a need exists and when the recommendation is supported by the Chest Physician.

All the district councils allow priority of housing on the recommendation of the Medical Officer of Health for active cases of pulmonary tuberculosis where the Medical Officer considers that their present housing accommodation is inadequate.

## Chiropody :

The following is a summary of treatments provided during 1966 by the various agencies or by direct service:—

### Summary of treatments :

Voluntary Association	Total Sessions	No. of Patients treated			No. of attendances
		Domi-ciliary	Non-Domi-ciliary	Total	
Bolton-on-Dearne O.A.P. Association .....	190	129	383	512	2532
Goldthorpe O.A.P. Association .....					
Thurnscoe O.A.P. Association .....					
Thurnscoe W.V.S. ....					
Conisbrough & Denaby Main O.A.P. Welfare Committee .....	110	113	304	417	1271
Mexborough Old Folk's Welfare Committee.....	207	93	367	460	2340
Swinton Aged Peoples Welfare Committee.....	134	75	267	342	1572
Rawmarsh Aged Peoples Welfare Committee.....	220	194	388	582	2741
Wath-on-Dearne Aged Peoples Welfare Com'tee	154	171	260	431	2209
Total .....	1015	775	1969	2744	12665

## Cervical Cytology :

Arrangements were made in April 1966 with Dr. G. D. Powell, Pathologist, Moorgate General Hospital, Rotherham to accept smears from patients in this area. The service commenced in a small way in June 1966 but the response so far has been disappointing.

This measure is designed to detect changes in the cells of the cervix which if left undiscovered might possibly lead to malignancy at a later date. At the same time as the smear is taken examination is made of the abdomen, pelvic organs and breasts.

Seventeen sessions were held at three centres at which 95 women attended. There were no positive or doubtful smears but one patient was referred to her family doctor for investigation of a breast abnormality.

### Phenylketonuria :

Every effort is made by the health visitor to test babies for phenylketonuria between the ages of four to six weeks. In 1966 2,079 babies were tested, one of which showed a positive reaction. The diagnosis was not confirmed as positive on serum testing at the hospital laboratory.

### National Assistance Act, 1948 - Section 47

This section of the Act is concerned with the compulsory removal of persons in need of care from their homes on a Court Order or in an emergency on an Order signed by two medical practitioners and a Justice of the Peace.

Such person may be removed to a County Home or hospital, provided that all the sections of the Act are satisfied. It was not necessary to take any action under this section in 1966.

### Joint Wardens Schemes for the supervision of the aged :

The scheme, organised jointly by the county council and the local district councils, provides for the supervision by wardens of aged persons, both in units or other purpose-built accommodation and in ordinary dwellinghouses. The wardens may or may not be resident. In all cases, the wardens are provided with a telephone, an illuminated sign where this is necessary, and are paid a salary, the amount of which is at the discretion of the local district council. In those circumstances where the warden is non-resident, it is their duty to visit one each day and to direct the help of the appropriate agency where this is required. No physical help, other than in an emergency is required of the warden.

During 1966 arrangements were made in some areas for the appointment of wardens to cover persons living in privately owned houses.

Details of all warden schemes including those provided by the district council in their own housing units and privately owned houses are shown below :—

Conisbrough :

2 Wardens Bungalows—

Shepherds Close,  
Denaby Main.

Coronation Cottages,  
Conisbrough.

Flats, Marchgate,  
Conisbrough.

1 Warden for private houses in Denaby  
Main.

Dearne :

8 Wardens Bungalows—

Chestnut Grove,  
Thurnscoe.

Low Grange,  
Thurnscoe.

Market Square,  
Goldthorpe.

King Street,  
Goldthorpe.

Green Gate Close,  
Bolton-on-Dearne.

Goldthorpe Road,  
Goldthorpe.

Houghton Road,  
Thurnscoe.

Flatlets, Windsor Court,  
Thurnscoe.

Mexborough :

4 Wardens Bungalows—

Pitt Street, Mexborough.

Crossgate and  
Montagu Street,  
Mexborough.

Highwoods Road,  
Mexborough.

Oak Close, Mexborough.

2 Wardens Flats—

Maple Leaf Court,  
Mexborough.

Hallgate, Mexborough.

There are also 7 wardens for private properties in Mexborough.

Rawmarsh :

1 Warden Bungalow—

Greenfield, Rawmarsh.

Swinton :

6 Wardens Bungalows—

St. Johns Road, Swinton.

St. Mary's Crescent,  
Swinton.

Brameld Road Swinton.

Highfield Farm, Swinton.

Meadow View, Kilnhurst  
and Kilnhurst Warden  
Scheme.

# Wath-upon-Dearne : 7 Wardens Bungalows and Flats—

Almond Place,  
Wath-upon-Dearne.

Varney Road,  
Wath-upon-Dearne.

Cemetery Road,  
Wath-upon-Dearne.

Mount Pleasant Road,  
Wath-upon-Dearne.

Coleridge Road,  
West Melton.

Stokewell Road,  
West Melton.

Tennyson Rise,  
West Melton.

## Meals on Wheels :

This service is provided to persons of pensionable age who are suffering from malnutrition or who are unable to cook their own meals due to disability or illness and have no-one else to cook their meals for them. Containers for the service are provided by the County Council who also subsidise the meals as necessary. The recipient is charged 1s. 0d. per meal.

Urban District	No. of Persons	Frequency	Total meals Weekly
Conisbrough	60	Twice weekly	120
Dearne	48	Four days a week	192
Mexborough	96	Twice weekly	192
Rawmarsh	50	Twice weekly	100
Swinton	48	Twice weekly	96
Wath-on-Dearne	42	Twice weekly	84
TOTALS	344		784

## Health Education :

### Schools :

A series of at least six health education lectures have been given to female school leavers in all our secondary modern schools. Although the same pattern of lectures are given, the extent of the periods during which they are given varies in different schools.

Whilst one health visitor gives a continuous set of lectures in one term to all leavers, another health visitor may spread her lectures throughout the whole year. This depends on the school programme and on the number of leavers in the school. It is during these periods that parents of school leavers are invited to the school to see some of the films shown to the girls and also to discuss problems of their teenage children with the doctor, the health visitor, the Nursing Officer and the school staff.

As many as 40 parents have been present this year at one session but again this depends on the type of area. During these sessions of health education lectures the students are introduced to the various members of the Public Health team, e.g. Midwives, Home Nurses and Public Health Inspectors. The health visitor also tries to meet parents of children who are admitted to the secondary modern schools. Talks on personal and general hygiene are given to these entrants.

Unfortunately opportunities are not available for the introduction of health education to Grammar School children because of the school syllabus. There are two large grammar schools in this division. The health visitor and the doctor only see these children at school medical inspections where problems can be freely discussed, and should the parents be present they are advised to see the health visitor at any time at the clinic.

We would like to meet parents before children leave the junior school and also to give personal hygiene lectures to girls particularly, but personal hygiene films cannot be shown in schools, as few if any junior schools in this division have a room which can be blacked out.

Sex education is not taught by the public health staff, and there has been no large scale anti-smoking campaign during this year.

Home accident prevention has been the main topic of our programme to school children and to parent group meetings during 1966.

#### Clinics :

Ante-natal: Relaxation classes combined with health education continue to be held in eight of our ten clinics.

Child Welfare Clinic: Displays and posters with numerous handouts are always in our clinics. We are unable to show film strips or films during our clinic sessions but health visitors hold group discussions.

Mothers Clubs: We have three very flourishing Mothers Clubs which meet fortnightly. One member of the health staff is always present. Towards the end of 1966 another Mothers Club was due to open at Monkwood. Mexborough is the place where a Mothers Club would flourish but due to the General Practitioner surgeries and Family Planning Clinics we are not able to do so. There is no session during the day when the clinic is free.

### College of Education :

A series of lectures have been given to the student teachers at the local college.

### Mental Health :

The mental health social workers hold a psychiatric social club at Wath Clinic and health visitors are often asked to join in their sessions.

I would like to take this opportunity to thank the Health Education Officer and her staff for all the help that has been given to us during 1966, for the displays, posters, hand-outs, films and filmstrips provided for us in a most efficient manner.

## DOMESTIC HELP SERVICE — SECTION 29

Establishment of domestic helps..... 93.25

No. of domestic helps employed at 31.12.66 part-time ..... 174  
(equivalent of 90.5 full time)

Groups receiving assistance :—	No. of Cases	Hours
(1) Maternity (including expectant mothers) .....	47	1,943
(2) Chronic sick		
(a) aged 65 plus.....	1,265	172,337
(b) aged under 65 and tuberculosis .....	115	9,940
(3) Others .....	35	3,508
(4) Mentally disordered .....	9	613
Totals	1,471	188,341

The provision of domestic help is based on a medical certificate from the family doctor and may be provided for the ill, aged, mentally defective, or to care for young children in the absence of the mother in hospital. The service is also provided when required for expectant mothers before, during, and after confinement.

The home help service is not a free service, each applicant is required to complete a form giving details of their financial circumstances and the charge is assessed after consideration of these details. Persons in receipt of a Supplementary Pension from the National Assistance Board are not charged.

In exceptional circumstances, and where this is authorised by the Divisional Medical Officer and the County Medical Officer, a twenty-four hour service can be provided.

Demand for this service continued to rise during the year and the equivalent of 13 extra full time home helps were required, and additional 20,000 hours of assistance was given compared with 1965.

## MENTAL HEALTH SERVICE

### Subnormal or Severely Subnormal :

Number under care and guidance	...	...	578
Number of ascertainments	...	...	13
Number attending training centre	...	...	127

### Mentally Ill :

Number discharged from psychiatric hospital	...	122
Number requiring after-care	...	566
Number of visits involved for after-care and patients referred from out-patient clinics	...	3,421
Number of cases referred to out-patients psychiatric clinics	...	64
Number referred to rehabilitation centres	...	11
Number referred to Youth Employment Office under 17 years of age	...	8

## Out-Patients Clinics :

Monday, Wednesday

Barnsley Beckett Hospital  
Consultant, Dr. M. Jeffrey.  
Mrs. F. H. Redman attends.

Monday, Thursday

Mexborough Montagu Hospital  
Consultant, Dr. N. L. Gittleson.  
Mr. R. N. Halliday attends.

Friday

Doncaster Royal Infirmary  
Consultant, Dr. M. Jeffrey.  
Miss Bailey attends for training purposes.

## Mentally subnormal patients not attending training centre :

Males	...	...	...	...	24 working full-time, 1 part-time.
Females	...	...	...	...	15 working full-time,
Males occupied at home	...	...	...	...	29
Females occupied at home	...	...	...	...	42

The need for community care of the mentally disordered is now well established, and the National Health Service Act of 1948 and the Mental Health Act, 1959 together offer ideal opportunities to provide that care in a most comprehensive and informal way.

The hospital plan and the Local Authority Health and Welfare plan together indicate the need, aims and benefits of community care, co-operation, understanding, communication and liaison between all agencies, whether statutory or voluntary will bring about a more complete community service, so balanced, that speedy medical and psycho social treatment will result in the effective rehabilitation of those among us whose misfortune it has been to suffer from a mental illness.

The Psychiatric "Rock" Club which commenced in August 1961 is but one example of how community services can work together. Its success can only be measured by the amount of interest shown by individual club members, coupled with the effective return of many of them to establishing a more rational and meaningful life.

The Club's aim is to meet as many as possible of the needs of the mentally disordered who, living within reasonable travelling distance, are able to reach the Club on their own initiative and where the services of the Club are considered socially to be of therapeutic value. The Club which has 70 members—an average attendance of 45 during the year—demonstrates how many of these needs are being met by group activities in an acceptable setting and where social needs of rehabilitation are given priority.

Meetings are held fortnightly and activities are many and varied, ranging from table tennis, darts and card games to vocational and recreational outings. Amidst all this intensive, yet friendly activity, an informal contact is made by Social Workers, and personal interviews are possible at all times. A good Staff to patient ratio is found necessary and we are fortunate in the invaluable assistance given by Voluntary Associations, e.g. members of the Townswomen's Guild, Youth Club Members of the Trinity Methodist Church and numerous other voluntary helpers.

During the early part of the year it was felt that some patients needed more help than the fortnightly meeting offered. Discussions took place with the Heads of Department of the Rockingham Institute of Further Education and it was arranged to commence a scheme of afternoon sessions where various crafts were introduced, e.g. millinery, dressmaking, art and embroidery, were suggested. Three teachers with a fund of kindness and a tolerance of mental illness were specially chosen. The classes commenced with 18 patients and since June an average of 24 patients have attended these weekly sessions regularly. These patients are now requesting more classes to be arranged and it would appear there is now the need for establishing a day centre to fill this need. In this way an inexpensive yet invaluable service can be offered to Society.

Patients are referred to the Classes and the Club by the Psychiatric Hospital and by Psychiatrists attending Outpatient Departments in the area. In many cases the patients have not required hospital treatment.

### **Training Centres**

There were 127 trainees on the roll at the Training Centre at the 31st December 1966.

Care Unit: This special unit which has provision for 12 severely subnormal patients is proving a great success. Parents are eager to accept this social service which provides care during the day for patients for whom the parents do not

wish permanent hospital care. These patients are cared for by experienced staff one of whom has nursing qualifications. They are conveyed to the centre each day in mini-buses which have been provided with special harnesses and paid escorts provided.

**Junior Wing:** The junior wing is divided into four groups responsible for children between the ages of 4 to 7 years, classes for the 7 to 9 year olds and thus 9 to 12 year age group followed by a transition class for trainees between the ages of 12 and 16 years. The trainees in this latter group are gaining experience which will benefit them when they are admitted to the senior section which includes the workshops.

Modern methods are used in their training including creative activities and social training. The trainees are encouraged to do a limited amount of shopping and to take walks in local parks with escorts.

**Senior Wing:** Trainees in the senior wing are introduced as soon as possible to the workshops where during the year production continued of curtains, pinarettes, feeders, bean bags, tea towels, cowrie shell bags, workholder cases, files, library ticket holders, corner flags, first-aid boxes, clothes horses, dolls cots, hollow wooden blocks, playhouse screens, clay boards, test-tube racks, clothes props, etc. for the County Supplies Department. The senior girls are also engaged in laundry work for the centre itself and for the divisional health office, whilst the senior boys are responsible for the maintenance of the grounds at the centre. An incentive pay award is made to all trainees engaged on industrial work over the age of 16 years, ranging from 7s. 6d. per week to £1 per week.

In the junior wing social training is included in the curriculum and outings are arranged during the summer months.

A modern all electric kitchen at the centre provides meals for all trainees for which a charge of 1s. 0d. per day is made. Free meals are allowed where the financial circumstances of the family demand.

There is an active Parent Teachers Association which meets bi-monthly at the centre has benefit by gifts from this organisation as well as the Wath and District and Mexborough branches of the society for mentally handicapped children. The employees of the Manvers Main Coking plant generously donate a portion of their profits from the sale of 'Coal News' to the centre.

## SCHOOL HEALTH SERVICE

The staffing position in the school health service during 1966 has been satisfactory; this has been supplemented by the employment of a retired Assistant County Medical Officer and general practitioners on a part-time basis.

Routine school medical inspections have continued with examinations of school entrants, first year secondary pupils and school leavers. Other special medical inspections and re-inspections are arranged as necessary.

Table I

### Inspection of School children 1966 :

Entrants	...	...	...	...	...	2,494
First Year Secondary	...	...	...	...	...	1,142
Last Year Secondary	...	...	...	...	...	1,024
						—
Total						4,660
						—
No. of Special Inspections	...	...	...	...	...	1,218
No. of Re-inspections	...	...	...	...	...	42
						—
Total						1,260
						—
Total Inspections						5,920

### Physical Condition of Pupils Inspected :

Satisfactory	...	...	...	...	...	99.5%
Found to require treatment	...	...	...	...	...	8.6%

The percentage of pupils found to be satisfactory on examination compares favourably with that for England and Wales and for the County as a whole. The percentage requiring treatment is also about the national average.

**Table II**

Cleanliness and Head Infestation :

Total no. examinations made for this purpose	19,210
Total no. found infested ... ..	528
Total percentage found infested ... ..	2.7%
(West Riding 1.9%)	

**Table III**

Care of Handicapped Children :

Milton Day School—E.S.N. ... ..	100
Residential School—E.S.N. ... ..	3
Residential School—Deaf or Partially Deaf ...	15
Residential School—Deaf E.S.N. ... ..	—
Residential School—Blind ... ..	4
Residential School—Partially Sighted ... ..	3
Residential School—Delicate ... ..	13
Residential School—Cerebral Palsy ... ..	10
Residential School—Physically Handicapped excluding Cerebral Palsy ... ..	5
Residential School—Epileptic ... ..	—
Residential School—Maladjusted ... ..	11
<hr/>	
Total	164
<hr/>	

The number of handicapped children at special schools remains at a constant level although during 1966 the number admitted to residential schools for the delicate and residential schools for the maladjusted increased two fold.

Table IV

B.C.G. vaccination 13 years and older school children :					
No. of children offered testing and vaccination if necessary	...	...	...	...	2,193
No. of acceptances	...	...	...	...	1,893
Percentage of acceptance	...	...	...	...	88.16%
Pre-vaccination Tuberculin Test :					
No. tested	...	...	...	...	1,641
Result of Test :					
No. Positive	...	...	...	...	306
No. Negative	...	...	...	...	1,268
No. Not ascertained	...	...	...	...	67
Percentage Positive	...	...	...	...	20.19%
No. Vaccinated	...	...	...	...	1,268

The acceptance rate for B.C.G. vaccination increased by 9% in 1966 and the level of 88.2% is satisfactory but I would be happier to see a 100% rate as the occasional case of pulmonary tuberculosis amongst adolescents is still being notified.

Table V

Audiometry :					
No. tested	...	...	...	...	1,330
No. with no loss	...	...	...	...	1,175
No. referred to School Audiology Clinic	...	...	...	...	155

The Consultant Paediatrician, Dr. C. C. Harvey is available for consultation and sees cases referred by both the school health service and the family doctors, and I am most grateful for his help during the year. Dr. J. D. Orme is Consultant in charge of the Child Guidance Clinic and his help is invaluable. The division is also fortunate in having the services of Miss M. A. C. Jones, Consultant Ophthalmologist and Dr. S. K. Bannerjee, to whom all visual defects are referred. I am grateful also to the school medical officers both whole and part-time for the performance of their duties during the year.

end of the year. Analysis of the effects of various combinations of radiator size and location is not easy, because of variations in atmospheric conditions, and may have to be suspended during the warmer period.

### Summary of Visits

Nuisances and repairs	...	...	...	158
Miscellaneous Housing visits	...	...	...	316
Hairdressers	...	...	...	2
Smoke Control Area No. 11	...	...	...	211
Miscellaneous sanitary visits	...	...	...	689
House letting visits	...	...	...	247
Infectious diseases	...	...	...	—
Licensed Premises	...	...	...	4
Drain tests	...	...	...	47
Smoke observations	...	...	...	4
Factories - sanitary accommodation	...	...	...	14
Food Premises	...	...	...	78
Overcrowding	...	...	...	2
Improvement Grant	...	...	...	48
Rats and Mice	...	...	...	355
Tents, vans and sheds	...	...	...	4
Piggeries	...	...	...	—
Verminous Premises	...	...	...	—
Cinema	...	...	...	—

Notices for Abatement			Out-standing at 31/12/65	Issued in 1966	Abated in 1966	Out-standing at 31/12/66
Informal	.....	.....	5	51	46	10
Statutory	.....	.....	—	6	6	—

### DRAINAGE AND SEWERAGE

4,765 dwellings are connected to the sewers and 4,762 have satisfactory drainage. A further 8 have unsatisfactory drainage. Alterations to the existing Sewage Works, (additional row of paddles to the aeration channels), had been completed at the end of the year, and the re-construction scheme had been finalised and was awaiting approval. This is necessary to accommodate the additional 1,000 houses planned within the district, which could be completed by the end of 1971.

There are no trough closets nor waste water closets in the area, and there are chemical or pail closets because no sewer is available. Alterations to some of these by the provision of a small sewage works is pending.

No major drainage problem arose, the clearance service continued and one passage drain was relayed, the cost being recharged to the owners.

A problem likely to develop is the disposal of so-called disposable nappies, many of which are obviously not soluble and which, of course, choke drains both in new and old properties. There are no statistics available to show how many are sold, nor how many have been accepted by the drainage system without problem, but quite clearly the sale of insoluble ones should be stopped.

"Drain" smells on the landing of a four-year-old house were investigated and traced to the bakelite lampholder which, having an unventilated lampshade, became hot. This arose following the replacement of the bulb by one of higher wattage, (and greater heat).

Further smells in the region of Glebe Road and Piccadilly Road were far more elusive, but were traced to sewer emanations. The cure has not yet been found, and it has not been possible to spend the amount of time on this problem which is desirable. It is apparent that effluent from the recently reconstructed settling tanks of a battery-hen farm is of considerable odour which escapes from inspection chamber covers and vent shafts and is not rapidly diluted and dispersed. All street gulleys in the area have been checked and caps refixed to rodding-eyes, but the nuisance persists. Smoke tests on certain days in certain atmospheric conditions show surprising escapes around ordinary inspection chamber covers (by far from air-tight), and remarkable air currents from tops of vent shafts. "Ordinary" sewer smells which presumably have been escaping in similar manner for many years have never been noticed. Investigations continue, under difficulties, because the nuisance arises very infrequently.

Number of houses connected to sewers ...	...	4,765
Number of houses with satisfactory PRIVATE drainage ... ..	...	8
Number of houses with unsatisfactory drainage ...		8

**Sewerage and Sewage Disposal Schemes**

- (i) Completed during the year—Interim Scheme at existing works.
- (ii) Under construction at year end ... Nil
- (iii) Awaiting approval at year end ... Nil
- (iv) In preparation at year end ... Nil

**Details of any part of the District requiring:—**

- (i) Sewers—New sewer being provided for new housing development.
- (ii) Improvement of defective sewers ... Nil
- (iii) Sewage Disposal Works ... Nil
- (iv) Improvement or extension of sewage disposal works—£250,000 extension awaiting approval of Min. of Housing & L.G.
- (v) Attention to storm water overflows ... Nil

**Sanitary Accommodation**

Number of houses provided with water closets	... 4,770
Number of houses provided with waste water or trough closet	... —
Number of houses provided with chemical closets	... 1
Number of houses provided with earth or pail closets	... 7
Number of earth closets, etc. converted to water closets	—
Number of houses served with earth closets, etc., due to lack of sewer or water facilities	... 8
Any special action taken to secure conversion of earth closets etc.,	... —
Action taken under Agriculture (Safety, Health and Welfare Provisions) Act 1956	... —

**Water**

Public Supplies:—

Water Undertaker	Nature/Origin of supply	Number of dwellings supplied
Sheffield Corporation	Upland Surface water.	4,778
		Total 4,778

Number of dwelling houses on public supplies ... 4,778

Natural Fluoride Content ... .. .1 p.p.m.

No houses have PRIVATE supply.

Number of samples examined:—

	Chemical		Plumbo-Solvency		Bacteriological	
	Sat.	Unsat.	Sat.	Unsat.	Sat.	Unsat.
Public Supply	69	—	69	—	69	—
Private supply	12	—	12	—	12	—
Total ...	81	—	81	—	81	—

All dwelling houses are supplied with mains water supplied by Sheffield Corporation, its natural fluoride content is .1 p.p.m. and 69 samples all proved satisfactory. The private supply to an industrial undertaking is satisfactory.

### Swimming Baths and Bathing Pools

There are no swimming baths nor bathing pools in this area.

### Improvement Grants

No conversion grants were made, but improvements were as follows:—

Applications received during the year ... ..	12
Owner/Occupiers ... ..	8
Tenanted Properties ... ..	4
Completed during the year:— ... ..	12
Owner/Occupiers ... ..	12
Tenanted Properties ... ..	—
Average grant per house... ..	£86 6 10
Amenities provided:—	
Fixed Bath ... ..	7
Shower ... ..	—
Wash-hand basin ... ..	8
Hot Water Supply ... ..	6
W.C. (inside dwelling) ... ..	12
Food Store ... ..	2

## Offensive Trades

There are no Offensive Trades in the area, and the Maggot Factory continued to operate without nuisance.

## Factories

23 Factories are registered, all of which are satisfactory, it was not possible to visit all the factories during the year.

### Prescribed Particulars on the Administration of the Factories Act, 1937

#### 1. INSPECTIONS for purposes of provisions as to health

Premises (1)	Number on Register (2)	Number of		
		Inspec- tions (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by the local authorities. ....	—	—	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the local authority ..... ..	23	14	—	—
(iii) Other Premises in which Section 7 is enforced by the local authority (excluding out-workers premises) .....	—	—	—	—
Total .....	23	14	—	—

## Canal Boats

No new boats were registered during the year and no boats were inspected. No boats are occupied by families.

## Infectious Diseases

No notifiable diseases were notified and no visits made.

## Moveable Dwellings

No problems arose during the year and unauthorised siting of vans near the "Terrace Inn" Kilnhurst, ceased after 2 days notice and a warning to the land occupier.

One problem site of the past, where there were 5 or 6 owners of small pieces of land (a former clearance area) has been developed by an engineering works, and the other site has remained free from vans since legal action was taken against the land occupier.

## Hairdressers

There was no change in hairdressing establishments in the area during the year, but no routine visits were made to these premises.

## Pest Infestation

The number of visits for rat infestation during the year fell compared with last year (562 down to 355), and affected premises numbered 99 (142 in 1965). The current figures approximate those of 1964.

	Type of Property	
	Non-Agricultural	Agricultural
1 No. of properties in district.	5,455	2
2(a) Total number of properties (including nearby premises) inspected following notification	355	—
(b) Number infested by		
(i) Rats	238	—
(ii) Mice	—	—
3(a) Total number of properties inspected for rats and/or mice for reasons other than notification	—	—
(b) Number infested by		
(i) Rats	—	—
(ii) Mice	—	—
SEWERS		
4 No sewer treatments were done.		

## Clean Air

The number 11 Smoke Control Area affecting about 350 houses was confirmed during the year, to become operative on 1st June 1967. Conversion of properties began during September and the amount of clerical work in the office almost doubled. I also dealt with the actual conversion of the Council Houses in the area, as Housing Manager (and "owner") arranging for Tenders and Appliances and work was scheduled to commence on this work late in February 1967. No problems have arisen, several circulars have been sent to the occupiers outlining all the details and almost all the dwellings have had at least one visit, and those completed, at least two. The biggest problem is the house of which all occupants are out during the

day, and it has been found advantageous to visit these between 5 and 7 p.m. Much has been learned from this Smoke Control Area, and the next one affecting existing houses should be dealt with in much less than the 5 years taken for this one between first survey and operative date.

Three Smoke Control Areas became operative during the year. All affecting areas of new development. At the end of the year the position was as follows:—

Number of Smoke Control Areas operative ...	8
Total area of operative Smoke Control Areas	107 acres
Number of dwellings in operative areas ...	186
Number of dwellings to be completed in, operative Smoke Control Area (estimated) ...	793
Areas confirmed but not operative ... ..	1
Dwellings in areas confirmed but not operative	355

Discussions were in progress at the end of the year for the erection of about 320 dwellings in an area to be heated from a central smokeless boilerhouse fired by coal, to be built and operated by the National Coal Board. The standard heating system for new Council dwellings is a room heater and one radiator, the provision of central heating being eschewed in the interests of economy.

Complaints have been received regarding smoke emission from automatic stokers which have rightly or wrongly been granted exemption, and contraventions have been observed. The matter has been referred to the West Riding County Council and Stoker Manufacturers, but these units must be carefully maintained and adjusted if their smoke emission is to be at a minimum.

# ATMOSPHERIC POLLUTION RECORDS 1966

Station	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Sulphur (Lead Peroxide Method)												
No. 1 Warren Vale .....	1.79	1.70	1.49	1.57	1.17	1.11	0.62	0.98	1.17	1.47	1.70	1.80
No. 2 Swinton Bridge .....	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record
No. 3 Kilnhurst (Gauge Discontinued)												
No. 4 Council Offices .....	2.18	2.11	1.85	1.72	1.37	1.16	0.94	1.21	1.25	1.78	2.07	2.58
No. 5 Bowbroom .....	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record	No Record
No. 6 Highthorne .....	2.12	1.95	1.71	1.99	1.24	1.22	0.77	0.95	1.14	1.74	2.07	1.76
Deposit (Tons per square mile)												
No. 1 Warren Vale .....	42.95	No Record	No Record	18.00	17.59	18.38	14.44	13.28	6.47	21.39	19.13	7.73
No. 2 Swinton Bridge (Gauge Discontinued)												
No. 3 Kilnhurst (Gauge Discontinued)												

Noise

No action was necessary during the year in the absence of complaints of noise. This difficult problem is one which an Act of Parliament has not solved and much field work on the subject is desirable. Individual sensitivities and noise characteristics vary so much that the problems may be insoluble.

Offices, Shops and Railway Premises Act

The initial registration of these premises was done last year but little revisiting was possible during the year under review. Notices have been issued concerning guards to certain types of bacon slicing machines (scheduled as dangerous), and follow-up checks are pending. Two accidents were reported and recorded.

TABLE A Registrations and General Inspections

Class of Premises  (1)	No. of Premises registered during the year  (2)	Total No. of Premises registered at end of year  (3)	No. of Reg. premises receiving a general inspection during the year  (4)
Offices .....	1	10	1
Retail Shops .....	—	35	39
Wholesale shops, warehouses	—	1	1
Catering establishments open to the public, canteens .....	—	1	1
Fuel Storage Depots .....	—	—	—
Totals	1	47	42

Table B

Number of Visits of all kinds by Inspector to  
Registered Premises ... .. 41

TABLE C    Analysis of Persons employed in Registered  
Premises by Workplace

Class of Workplace (1)	Number of persons employed (2)
Offices        ...        ...        ...        ...	94
Retail Shops        ...        ...        ...	163
Wholesale Depts., warehouses ...	54
Catering establishments open to the public        ...        ...        ...	—
Canteens        ...        ...        ...        ...	2
Fuel Storage Depots        ...        ...	—
<div>Total        ...        ...</div>	313
<div>Total Males        ...</div>	143
<div>Total Females ...</div>	170

SECTION “D”

Housing and Slum Clearance

Five areas were declared during the year involving 50 dwellings. At the end of the year 55 of the 229 dwellings on the current (1965-70) Programme had been dealt with, an increased rate compared with the past 8 years, (approximately 30 per year). It would seem unlikely that the programme will be completed by 1970 (actually August) without assistance, unless a reduction in the amount of routine and other work is accepted. When it is realised that by 1970 the population will have increased by almost 2,000, and the total number of houses by over 700, the problems to arise will be understood.

Council dwellings under construction at 31/12/66	178
Proposed building (300 for incoming mineworkers in 3 years) ...        ...        ...        ...        ...        ...	326
Private development proposed. At least:—        ...	250
	<div>754</div>

### Housing during 1966:—

New dwellings built by local authority	...	...	49
New dwellings built by private enterprise...	...	...	21
Number of families rehoused from Clearance Areas			24
Number of persons rehoused from houses demolished	...	...	76

A further 50 or 60 dwellings for slum clearance will also be required and the waiting period for a newly married couple could be reduced to less than 12 months. The steady pace of Swinton's past development is now replaced by a vigorous programme, although the day of the low-rented council house, newly built, is gone, and we may be faced with a rationing system based on price and not a Waiting List.

In the absence of a change in housing standards as laid down by the Housing Act 1957, and this is unlikely because of the low standard of housing in many areas, some of Swinton's future clearance areas may have to be dealt with by Compulsory Purchase, if fit, individual houses in terraced rows are not to be left standing on their own. This has not been necessary in the past, and clearance of the 465 houses since 1950 has been achieved with the minimum of cost in administration and compensation.

A major problem is the property, not unfit, which is in an area not suitable as an Improvement Area. Reference to this aspect of the "dismal districts" (mentioned in my Report of 1963) is made in the report "Our Older Houses - A Call for Action", and it is essential that these dwellings and areas are made more attractive if economically possible, or cleared. The clearance of sections of a terraced street does not overcome the dismal rear aspects with leaning and bulged boundary walls, rough, half-paved yards and dilapidated or disused out-buildings. Power to adequately deal with this is overdue and the remedy expensive. The repair of boundary walls as provided for in the West Riding County Council (General Powers) Act, merely places the onus on the owner or occupier.

The last prefab in the district was cleared in January and the first of 50 flats being built on the site of 28 prefabs was being completed at the year end.

The Housing List at 31st December 1966 was as follows:—

CLASS	Jan. 1967	Jan. 1966	Jan. 1965	Allocations	
				1966	1965
T.B. Cases	1	1	2	—	2
O/Crowded Lodgers	1	—	—	2	5
Lodgers with Children	45	75	61	14	15
Lodgers without Children	38	59	59	4	12
O/Crowded Tenants	12	8	3	3	6
Tenants	206	250	257	15	12
	<hr/> 303 <hr/>	<hr/> 393 <hr/>	<hr/> 382 <hr/>	<hr/> 38 <hr/>	<hr/> 52 <hr/>

Total applicants without houses of their

own	...	...	January 1965	...	120
			January 1966	...	121
			January 1967	...	74

#### Houses owned by S.U.D.C.

(excluding new development—Bow Broom)

Pre-war houses ...	...	...	...	783
Pre-war bungalows	...	...	...	68
Post-war houses: 2 bedroomed	...	...	...	272
3 bedroomed	...	...	...	737
4 bedroomed	...	...	...	1
Two-bedroomed flats ...	...	...	...	129
Three-bedroomed maisonettes	...	...	...	23
Two-bedroomed maisonettes ...	...	...	...	15
Post-war bungalows	...	...	...	200
Two-bedroomed bungalow	...	...	...	1
Professional Type Houses: 4 bedroomed	...	...	...	7
3 bedroomed	...	...	...	12
Prefabricated bungalows	...	...	...	—
Three-bedroomed houses, garage attached ...	...	...	...	34
				<hr/> 2282 <hr/>

11.74% of council owned dwellings (including current proposals) are single bedroom old peoples dwellings. (Excludes all property purchased by the Council for clearance).

458 Council dwellings have been built since December 1957 (and 128 prefabs cleared, leaving a net increase of 330) and 278 unfit dwellings have been demolished (89 by agreement, 189 by Clearance Area Action).

The population has increased by 20%, (from 11,922 to 14,200) and the number of dwellings by 14%.

## SECTION "E"

### Inspection of Food and Food Premises

Routine work on food hygiene was retarded during the year due to the need to deal with current problems. There are no slaughterhouses in the area, (the last one remaining was closed in 1958), no establishments for the production of poultry for food, no egg pasteurisation plants, and no ice cream manufacturers. There are 46 ice cream retailers and 10 premises preparing meat products.

The following tinned goods were surrendered and destroyed under supervision:—

		No.	lbs.	oz.
Tinned Meat	...	439	1,669	1
Tinned Vegetables	...	597	523	7
Tinned Fruit	...	585	758	7
Tinned Tomatoes	...	649	481	13
Tinned Soup	...	79	62	5
Tinned Milk	...	273	214	8
Tinned Puddings	...	175	168	6
Tinned Fish	...	61	27	9
Whole Rice	...	—	—	—

## PUBLIC CLEANSING

Tipping commenced at Easter on the abandoned Dearne and Dove Canal site, and extreme care has been necessary to prevent nuisance. The site is not ideal, due to the proximity of dwellings and areas of stagnant water. Wire-netting screens have been erected to catch loose paper, and pumping and shallow tipping have been carried out to reduce water pollution problems. The latter has been eminently successful, the former has not. Damage to the wire-netting has occurred, although the proximity of four Police Houses may be a deterrent and could have reduced the incidence of damage.

The first necessity was to clear the water from the two basins and the low-lying ground, in the interests of safety. This was completed by the end of the year without difficulty and without pollution troubles. The remaining water-logged area towards the Wath boundary will be dealt with as soon as possible, a ditch cut by British Waterways has cleared much of the water and no problems should arise.

Cost of disposal is difficult to ascertain because refuse collected is not weighed as a routine, and sample weighings should only be taken as a guide. About 12 tons of refuse per day is disposed of by controlled tipping. This is approximately 3,000 tons per year and in all probability over 3,500. The cost of disposal is approximately 10/- per ton. This is less than half the cost of disposal at refuse handling plants built several years ago, and much less than a new automated plant to burn refuse without separation. Provided there are the usual safeguards, controlled tipping is as good hygienically as any other disposal system involving composting and/or pulverising or incineration, it is certainly the cheapest and makes the purchase of suitable land for disposal of house refuse by controlled tipping worthy of serious consideration.

The present tip should have a useful life of about 5 years, depending on the final levels chosen. Part of the site is rented from British Rail and a tipped level approximately 6ft high has been agreed which governs the remaining levels. If no further tipping space is available, a site for mechanical disposal will be necessary and due consideration of this will ultimately be necessary. Such a plant for Swinton may not be feasible and economies usually accrue where a larger unit serving a larger population can be installed. For this reason, a joint project involving several authorities may well be the solution. The old tip adjacent to the Sewage Works is not used as a tip, but is an essential area for "rough" usage where old furniture and other combustible items can be burned. It is also used by the Parks staff for burning tree prunings and similar items, and for the tipping of loads of rubbish which have been accidentally ignited in the vehicle during collection.

The collection service was maintained with little added expense, (mainly due to the freeze), but one vehicle is at the end of its useful life and is to be replaced in 1967/68. This will provide a vehicle capacity in excess of immediate requirements, but since a vehicle life of 12 - 15 years is anticipated, we must be prepared for the increase in the number of dwellings planned for the future, (an additional 1,000 dwellings will have been erected and occupied before the present vehicles are replaced).

The few dwellings in smoke control areas have not increased the amount of refuse collected and provided householders are responsible in the use of their dustbins, no problems should arise. Difficulty is caused by householders obstructing accesses to bins by locking gates or leaving cars in drives.

A little over 300 Radburn Plan dwellings will be provided with paper sacks and the short hauls to the tip have not dictated the need for the purchase of a sophisticated refuse collection vehicle with a complicated hydraulic system of compression.

The few disadvantages of the Fore and Aft Tipper with Power Press are offset for the small authority with short hauls by the vehicle's reduced capital cost and maintenance problems.

Vehicles are as follows :—				Date Registered
S.D. Fore & Aft Tipper (18 cu. yds.)	...	...	...	1.7.52
S.D. Fore & Aft Tipper (18/25 cu. yds.) (power press)	...	...	...	1.1.63
Fordson Tractor/Digger/Scraper	...	...	...	1.4.59
Morris Lorry (9 cu. yds.)	...	...	...	8.10.65
Morris J.4 Van	...	...	...	1.8.66
Frequency of Collection	...	...	...	7 - 8 days
Number of Premises	...	...	...	4,778
Number of dustbins emptied per week...	...	...	...	4,935
Cost of Collection	...	...	...	£12,639
Cost of Disposal	...	...	...	£1,634
				<hr/> £14,273 <hr/>
Salvage Revenue	...	...	...	£1,350
(not deducted from above)				

Costs were kept below the estimate by careful control and employing temporary labour during holiday time. In spite of this, the service and salvage revenue was maintained.

SECTION "F"

PREVENTION AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

Infectious Diseases (Corrected) Age Distribution

Diseases	Total Cases Notified	Cases after Correction	Under 1 yr.	1 —	2 —	3 —	4 —	5 — 9	10 — 14	15 — 24	25 and over	45 — 64	65 and Over
Scarlet Fever .....	10	10	—	—	1	3	1	3	1	—	1	—	—
Whooping Cough	18	18	1	4	2	2	2	6	—	—	1	—	—
Measles .....	127	127	12	20	21	18	16	40	—	—	—	—	—
Dysentery .....	2	2	—	—	—	—	—	—	—	1	1	—	—
Acute Pneumonia	1	1	—	—	—	—	—	1	—	—	—	—	—
Food Poisoning	1	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	159	158	13	24	24	23	19	50	1	1	3	—	—

## TUBERCULOSIS

### No. on Register at 31st December, 1966

			Males	Females	Total
Pulmonary	...	...	41	31	72
Non-Pulmonary		...	6	14	20
			47	45	92

### No. Removed from Register during 1966

			Pulmonary		Non-Pulmonary		Total
			M.	F.	M.	F.	
Deaths	...	...	1	—	—	—	1
Others (cured, re-diagnosed transfers of area etc.)			2	—	—	—	2
			3	—	—	—	3

### Additions to Register during 1966

			Pulmonary		Non-Pulmonary		Total
			M.	F.	M.	F.	
New Notifications	...		—	2	—	—	2
Others (cases restored to Register, transfers etc.)			—	—	—	—	—
			—	2	—	—	2

### New Notifications

Age groups				Pulmonary		Non-Pulmonary		Total
				M.	F.	M.	F.	
35-44	...	...	...	—	1	—	—	1
45-54	...	...	...	—	1	—	—	1
				—	2	—	—	2



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